2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

P01675 **DOCUMENT #**

MOTHER'S VIDEO AND MOVIE COMPANY, INC.



May 01, 2003 8:00 am 8 Secretary of State
05-01-2003 90198 030 ***150.00

Principal Place of Business 368 MERRITT SQUARE MERRITT ISLAND FL 32952 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country Zip Country Mailing Address 709 WINGFRONT LN MELBOURNE FL 32940 MELBOURNE FL 32940 Applied F Not Applied F No			
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City & State City & State City & State City & State 4. FEI Number 59-2211900 Applied F Not Applie Zip Country Signature Of Status Desired City \$8.75 - Additional			
Zip Country Zip			
Fee Required			
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent			
WINDOM, MICHAEL D.			
709 WINGFOOT LANE Street Address (P.O. Box Number is Not Acceptable)			
MELBOURNE FL 32940			
City FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Trust Sund Contribution Added to Fee			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: